

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Appln. No. :10/606,618 Confirmation No.:4915
Applicant :Judd et al.
Filed :June 26, 2003
TC/A.U. :1645
Examiner :S. Devi
Customer No. :00270
Title : *OMP85 PROTEINS OF NEISSERIA GONORRHOEAE AND NEISSERIA MENINGITIDIS, COMPOSITIONS CONTAINING SAME AND METHODS OF USE THEREOF*

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

INFORMATION DISCLOSURE STATEMENT

Sir:

Applicant submits to the Examiner the attached document listing and this paper pursuant to 37 CFR § 1.56 and § 1.97-1.98.

This Information Disclosure Statement is submitted more than three months from the filing date of this application and after the receipt of a first Office Action. Therefore, a fee of \$180 is believed due.

The Director is hereby authorized to charge any deficiency in any fees due with the filing of this paper or credit any overpayment in any fees to our Deposit Account Number 08-3040.

REMARKS

Listed below is a co-pending, US Patent application. This application and the present application are commonly owned:

US Patent Application No. 11/605,689 filed November 29, 2006

The Examiner is respectfully requested to consider the enclosed documents identified in this paper and in the attached form during the course of examination of this application.

Respectfully submitted,

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<p>Substitute for form 1449B/PTO</p> <p>INFORMATION DISCLOSURE STATEMENT BY APPLICANT</p> <p>(Use as many sheets as necessary)</p>		Complete if Known	
		Application Number	10/606,618
		Filing Date	June 26, 2003
		First Named Inventor	Judd et al.
		Group Art Unit	1645
		Examiner Name	S. Devi
Sheet	1	of	1
		Attorney Docket Number	
		UM/SBC147BUSA	

NONPATENT LITERATURE DOCUMENTS

Examiner Signature _____ Date Considered _____

* EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

¹ Applicant's unique citation designation number (optional). ² Applicant is to place a check mark here if English language Translation is attached.

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